

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance Y OF NEW BEDFORD

of Massachuse		2014 Citylor Towns Clerk or Election Commission
Fill in Re	porting Period dates: Beginning Date:	2-17-013 Ending Date:
Type of R	Report: (Check one)	COMMISSIONER
8th day	preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Wat	M RARUEY Candidate Full Name (if applicable)	ROGER BRICHTMAN Committee Name
Cov	Office Sought and District	Name of Committee Treasurer
	Tenny Lind STREET Residential Address	Committee Mailing Address
Telephone Nu	umber (optional): 508-993-4599	Telephone Number (optional): 5081-184-1484
	SUMMARY BALANC	CE INFORMATION:
	Line 1: Ending Balance from previous report	1420.81
	Line 2: Total receipts this period (page 3, line 11)	970.00
,	Line 3: Subtotal (line 1 plus line 2)	2390.81
	Line 4: Total expenditures this period (page 5, lin	ne 14) 2166, 06
	Line 5: Ending Balance (line 3 minus line 4)	224.75
	Line 6: Total in-kind contributions this period (pa	page 6)
	Line 7: Total (all) outstanding liabilities (page 7)	4465.00
	Line 8: Name of bank(s) used: WEW B	EDPORD CREDIT UNION
I certify that I activity, include finance activity	have examined this report including attached schedules and it is, to the best ding all contributions, loans, receipts, expenditures, disbursements, in-kind ty of all persons acting under the authority or on behalf of this committee in the penalties of perjury:	est of my knowledge and belief, a true and complete statement of all campaign finance d contributions and liabilities for this reporting period and represents the campaign in accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date:
FOR CAN	DIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	box only)
I certify t activity, o	the with Committee and no activity independent of the committee that I have examined this report including attached schedules and it is, to the of all persons acting under the authority or on behalf of this committee in an any liabilities nor made any expenditures on my behalf during this reporting	he best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ng period.
I certify t	the without Committee OR Candidate with independent activity filing so that I have examined this report including attached schedules and it is, to the activity, including contributions, loans, receipts, expenditures, disbursement in finance activity of all persons acting under the authority or on behalf of the	the best of my knowledge and belief, a true and complete statement of all campaign onts, in-kind contributions and liabilities for this reporting period and represents the this committee in accordance with the requirements of M.G.L. c. 55.
Signed under	the penalties of periury:	Carnles (Gandidate's signature) Date: 1/21/70/4

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received (al	Iphabetical listing required)	Amount	(for contributions of \$200 or more)
	,		
ine 9: Total Receipts over			
ine 10: Total Receipts \$50	and under* (not listed above)		← Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

			Schedule A : Recelpts		
Date Received	d Last Name First Nam		Address	Amount	Occupation & Employer over 200.00
	Burgess	Robert	Purchase Street, New Bedford, Ma	80.00	
10/24/2013	Farland	Elizabeth	555 Lantern Lane, New Bedford, Ma 02740	160.00	
10/24/2013	Ross	Linda	380 W Rodney French Blvd., New Bedford, Ma	55.00	
	Line 9:	Total	receipts in excess of \$50 (or Listed above)	295.00	
	Line 10:	Total	receipts \$50 and under (not listed above)	675.00	
	Line 11:	TOTAL	RECEIPTS IN THE PERIOD	970.00	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)		
		Line and the second sec			
	ts over \$50 (or listed above)				
	ets \$50 and under* (not listed above)		← Enter on page 1, line 2		

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

	To Whom Paid	ittee name and a page number on		A :	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
		<u> </u>		_	
		·			
		·			
		·			
		Line 12: Total Expenditures ov	ver \$50 (or listed above)		
					
	ayar da karan da kar Karan da karan da ka	Line 13: Total Expenditures \$50	0 and under* (not listed above)		
	Enter on mass 1 line 4 >	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	**************************************	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD					

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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Schedule B: Expenditures				
Date Paid	To Whom Paid	Address	Purpose of Expenditures	Amount
	Fun 107 / Town			
10/24/2013	Square	Fairhaven, Ma	Ads	\$ 96.00
10/19/2013	Inner Bay Café	Cove Rd, New	Luncheon Fund Raiser	\$ 364.00
10/29/2013	O Jornal	Fall River, Ma	Ads	\$ 105.00
10/19/2013	Office Max	No. Dartmouth, Ma	Post Cards	\$ 368.97
11/5/2013	Riccardis	Hathaway Rd, NB	Campaign night food	\$ 153.12
11/5/2016	Shawmut Diner	Shawmut Ave. NB	Campaign space/ Bev/ dessert	\$ 150.00
11/1/2013	Stop & Shop	New Bedford, Ma	Meet & Greet	\$ 57.61
10/24/2013	WBSM	Fairhaven, Ma	Ads	\$ 475.00
			·	
-	Line 12:	Expenditures over		1,769.70
	Line 13:	Expenditures \$50 a		396.36
	Line 14:	TOTAL EXPENDIT	JRES	2,166.06

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Expenditures over		
	toria. A	Line 13: Expenditures \$50 and under* (not listed above)		

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contributions	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	0	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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Schedule D: Liabilities					
Date Received	To Whom Due	Address	Purpose	Amount	
9/9/2007	Naomi Carney	16 Jenny Lind St.	Loan	\$1,000.00	
3/3/2007	INAUTH Carriey	TO Jenny Lind St.	Loai	\$1,000.00	
10/12/2005	Naomi Carney	16 Jenny Lind St.	Magnets for Adversising	\$411.84	
10/17/2005	Naomi Carney	16 Jenny Lind St.	Ink for Printer	\$57.42	
10/1/12003	INAUTH Carriey	To Jerniy Lind St.	Barrys Wine & Spirit	407.42	
9/9/2005	Naomi Carney	16 Janny Lind St	Door Prize	\$58.00	
9/9/2005	Naomi Carney	16 Jenny Lind St. 16 Jenny Lind St.	Stamps for Mailings	\$74.00	
9/9/2005	INaomi Carney	To Jenny Lind St.	Mics receipys under	\$74.00	
10/1/1/2005	Nami Carnay	16 January Lined Ct	1 ' '	ቀባለን ንፖ	
10/14/2005	Naomi Carney	16 Jenny Lind St.	50.00	\$203.37	
11/8/2005	Naomi Carney	16 Jenny Lind St.	Election Night Food	\$430.00	
5/5/2005	Naomi Carney	16 Jenny Lind St.	Charity Cook off	\$53.70	
11/17/2005	Naomi Carney	16 Jenny Lind St.	D&D Caterer	\$84.00	
11/2/2005	Naomi Carney	16 Jenny Lind St.	Standard Times	\$425.00	
				···	
11/6/2007	Naomi Carney	16 Jenny Lind St.	Hess	\$25.02	
			Enterprises Rent-A-		
11/6/2007	Naomi Carney	16 Jenny Lind St.	Car/Truck	\$107.56	
			Enterprises Rent-A-		
11/6/2007	Naomi Carney	16 Jenny Lind St.	Car/Van	\$97.06	
11/6/2007	Naomi Carney	16 Jenny Lind St.	Exxon Mobil	\$12.00	
10/18/2009	Naomi Carney	16 Jenny Lind St	Postage	\$176.00	
11/3/2009	Naomi Carney	16 Jenny Lind St	Hess/Gas	\$25.00	
8/9/2011	Naomi Carney	16 Jenny Lind St	Postage	\$88.00	
8/9/2011	Naomi Carney	16 Jenny Lind St	Envelopes	\$30.36	
8/23/2011	Naomi Carney	16 Jenny Lind St	Printing/Ink	\$45.41	
8/19/2011	Naomi Carney	16 Jenny Lind St	Election Disk	\$10.00	
10/10/2011	Naomi Carney	16 Jenny Lind St	Gas	\$64.01	
10/20/2011	Naomi Carney	16 Jenny Lind St	Stop & Shop/Coffee Hour	\$24.13	
10/8/2011	Naomi Carney	16 Jenny Lind St	Job Lot/Coffee Hour	\$39.12	
			Job lot/Spagetti Dinner		
10/20/2011	Naomi Carney	16 Jenny Lind St	Aprons	\$11.10	
10/26/2011	Naomi Carney	16 Jenny Lind St	Lowes/Lumber Signs	\$37.29	
			Office Max/Post Cards &	40	
11/5/2011	Naomi Carney	16 Jenny Lind St	Wires	\$204.31	
11/5/2011	Naomi Carney	16 Jenny Lind St	Dollar Tree/Coffe Hour	\$15.81	
117072011	Tracini Garney	10 dorning Ensarot	Donar Trocy Conte Trocy	Ψ10.01	
11/6/2011	Naomi Carney	16 Jenny Lind St	Stop & Shop/Coffee Hour	\$81.05	
1170/2011	Tradini Garrioy	To dorning Entarot	Shawmut Diner/Election	Ψ51.00	
11/8/2011	Naomi Carney	16 Jenny Lind St	Night Gathering	\$400.00	
111012011	riaomi Vairiey	TO DOTHRY EITHOUSE	Barry's Wine &	ψηΟΟ,ΟΟ	
			Spirit/Election Night		
11/8/2011	Noomi Carney	16 January Lines Ct	Gathering	0406.09	
11/6/2011	Naomi Carney	16 Jenny Lind St	Price Right/Coffee Hour	\$126.98	
11/0/2011	Naomi Carney	16 Jenny Lind St	Frice Right/Conee Hour	\$47.46	
	Line 18:	OUTSTANDING LIAB	ILITIES (ALL)	\$4,465.00	

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	: #:			
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	4405.a